

**INJURY PREVENTION TASK FORCE (IPTF) MEETING
FEBRUARY 25, 2003**

MEMBERS PRESENT

Debra Brus, Epidemiologist, Washoe County District Health Department (WCDHD)
Kelly Anrig, Safety Engineer, Nevada Department of Transportation (NDOT)
Bruce Mackey, Bike/Pedestrian Safety, Office of Traffic Safety (OTS)
Tina Perry, Health Resource Analyst II, Bureau of Health Planning & Statistics, (BHP&S)
Richard Fenlason, EMS Representative II, Emergency Medical Services (EMS) for Fergus Laughridge
Mike Bernstein, Health Educator II, Clark County Health District Safe Kids Coalition/Safe Kids Coalition
Dr. John Fildes, Department of Surgery, University Nevada School of Medicine (UNSOM)
Robinette Bacon, HIV-AIDS School Health Coordinator, Department of Education (DOE)
Cynthia Huth, RN, Health Program Specialist, Bureau of Family Health Services (BFHS)
Kristen Rivas, Injury Prevention Coordinator, BFHS

MEMBERS ABSENT

None

STATE HEALTH DIVISION STAFF PRESENT

Tami Terstegee, Administrative Assistant, BFHS

OTHERS PRESENT

David Becker, NFIRS Program Manager, SFM
Misty Allen, Crisis Lines Director, Crisis Call Center
Eric Guevin, Paramedic, REMSA Safe Kids
Jeanne Cosgrove, Safe Kids

CALL TO ORDER AND INTRODUCTIONS

Kristen Rivas called to order the Injury Prevention Task Force (IPTF) meeting at **2:07 p.m.** at the Department of Transportation (NDOT) buildings in Reno, Carson City, and Las Vegas. This was a videoconferenced public meeting and the public was invited to make comments. In accordance with the Nevada Open Meeting Law, this meeting was posted at the following locations: Kinkead Building, Carson City; Nevada State Library and Archives, Carson City; Washoe County District Health Department (WCDHD), Reno; Clark County Health Department (CCHD), Las Vegas; Elko Nursing Office, Elko; and NDOT offices in Carson City, Reno and Las Vegas.

APPROVAL OF MINUTES FROM SEPTEMBER 18, 2002

Ms. Rivas motioned for approval of the minutes as written and Robinette Bacon seconded the motion.

MOTION APPROVED.

DATA SURVEILLANCE REPORT UPDATE

Ms. Rivas stated a package had been sent to the Task Force members, which included the data surveillance project report, the resource directory, and the Violence Against Women (VAW) needs assessment report. She explained this is the first time a data surveillance project like this has been done and is aware there could be many changes made. An in-depth discussion of any additions or changes to the report will be done as an agenda item at the next meeting. She noted the project was finished in November of 2002, sent to print, and forwarded to the Centers for Disease Control and Prevention (CDC) in December of 2002. This met our strategic planning goal by having it completed and submitted to CDC by December 31, 2002.

DATA LINKAGE PROJECT UPDATE

Ms. Rivas explained for the Data Linkage Project a request for proposal (RFP) was done to find a consultant who would link the different databases throughout the state containing injury information and a contractor who would write the final report. She noted linking the databases would provide an overall picture on the types of injuries occurring statewide. She continued by saying the Bureau of Health Planning and Statistics (BHP&S) is compiling the data and when completed, will turn the information over to the contractor.

VIOLENCE AGAINST WOMEN (VAW) NEEDS ASSESSMENT REPORT UPDATE

Ms. Rivas reminded the Task Force this is a supplemental grant from the Injury Prevention Program (IPP) through the CDC. She continued with the process of how the needs assessment was done and who the VAW subcommittee members are.

VAW IMPLEMENTATION GRANT REPORT UPDATE

Ms. Rivas stated the second part of the funding is the implementation of the needs assessment outcome. She noted the assessment determined training and education is needed throughout the state. The funding for four statewide trainings has been received and will be geared toward Judges and healthcare providers. Ms. Rivas said these are currently in progress. She said she spoke to the contract officer for the VAW program and was told they have yet to receive their budget from CDC. When the budget is received, Ms. Rivas will be notified as to whether or not there will be a third plateau of funding. If there is, she will have approximately 3 weeks to write a grant for the next cycle.

RESOURCE MANUAL DIRECTORY REPORT UPDATE

Ms. Rivas stated the resource manual is a requirement through the Injury Prevention grant that had to address injury prevention resources throughout the State of Nevada. The main goal of the directory was to combine resource information obtained from the statewide focus groups and needs assessment survey with the resource directory from the Bureau of Family Health Services (BFHS). After distribution of the directory, Ms. Rivas had the opportunity to speak with several recipients who would like to see it updated regularly. Ms. Rivas discovered the directory could be put on a website. She added through collaborative effort, with Washoe Medical Center (WMC), Health of Southern Nevada (HSN) and several other agencies, they will together update the directory by each taking responsibility for different sections.

BICYCLE AND PEDESTRIAN SAFETY REPORT

Bruce Mackay, Bicycle and Pedestrian Officer for the Office of Traffic Safety (OTS) stated his office offers instructor courses to teach law enforcement officers, teachers and other community volunteers how to teach children bicycle and pedestrian safety. OTS offers 6 to 10 classes per year, which are accredited by the Department of Education (DOE), graduate credit can be obtained for \$50 from Sierra Nevada College and Education, and are Peace Officer Standards and Training (POST) certified for law enforcement officers. The details of the classes can be found on the website, www.ots.state.nv.us. Mr. Mackay stated there have been 250 graduates thus far. Graduates of the program are entitled to safety materials free of charge and are eligible to apply for up to \$1000 in minigrant funds for programs related to bicycle and pedestrian safety. Mr. Mackay reminded everyone the Bicycle and Pedestrian Conference will be held in Las Vegas on March 27 and 28, 2003. Registration can be done on the OTS website. He added there is a project, which will be starting on Sunday, April 13, 2003, called Safe Pedaling Across Nevada (SPAN). Several cyclists and support people will be riding bicycles from the California border near Minden north to Fernley and then across Nevada on Highway 80. They will be stopping in communities along the way and giving bicycle safety presentations to school children. Mr. Mackay provided an updated on the Highway Safety Summit Meeting that was held on January 13, 2003 stating it was held primarily as the first step in the grant cycle. He proceeded to explain the OTS grant cycle. He noted the summit was attended by 26 people primarily from NDOT, law enforcement, OTS and the Las Vegas Metro Police Department (LVMPD). The objective of the summit was to identify highway safety issues by securing data from multiple sources. Mr. Mackey said a lively discussion of the areas to be focused on took place. By a voting process, the attendees ranked the top issues from their discussions. The issue topping the list was lack of driver training and experience. This was followed by traffic records, which Mr. Mackay explained as the gathering of data for the Personal Digital Assistants (PDA) the law enforcement officers use. When using the PDAs, a ticket can be tracked through the adjudication process. The third issue on the list is seat belt use. Pedestrian deaths within 150 feet of an intersection in Clark County were listed as issue number four. The fifth issue at the summit was driving under the influence (DUI). Mr. Mackey stated Ms. Rivas was given a complete report.

NEVADA SAFE KIDS (CLARK COUNTY) EFFORTS IN NEVADA AND CLARK COUNTY, INJURY PREVENTION EFFORTS REPORT

Mike Bernstein began by speaking on promoting safe car seats for children. He stated the Safe Kids coalition has made contact with General Motors (GM) and other sources to receive funding to set up year round car seat checks. Currently, there is one fitting station, which is open every Friday from 8:00 a.m. until 5:00 p.m. The station takes appointments, as well as, drive-thru clients.

Mr. Bernstein explained the parents or guardian can receive a car seat and are provided instruction in the proper installation and use of the car seat. Upon leaving, they receive a Car Seat Certificate. Mr. Bernstein added there will be an instructor certification class in March 2003. He noted those who work with the installation and car seat check program are all certified. These instructors work closely with the police departments and in April a second fitting station will be opened in association with a local retail store. Mr. Bernstein stated statistics show 90% of the car seats in cars are not properly installed.

Mr. Bernstein stated he is the co-chair of Drowning Prevention for Safe Kids (DPSK) and drownings are a main issue with the Clark County Health District (CCHD). The largest concern is with drownings of children four years old and under. He continued by explaining Las Vegas has approximately 70,000 residential swimming pools and 5,000 public pools, which does not include hotels. Over the past two years, with the help of the county and local sponsors, DPSK has put together about \$50,000 a year to do public information campaigns. Mr. Bernstein noted in the same time frame there was a drop in drowning rates. He stated up until two years ago, CCHD had been tracking these rates. The drowning rate for children ages zero to four was well above nine children per 100,000. In the last two years, it has been reduced to about four and a half children per 100,000. Mr. Bernstein stated a series of ads run on television, as well as, radio and public service announcements (PSAs). Most of the ads are testimonials of parents of children who have had drowning incidents. The problem Mr. Bernstein finds is in acquiring funding to expand the campaign. Continuing he stated in the spring of 2002, the Southern Nevada Pool Code Committee (SNPCC) revised the codes to include a requirement of a secondary source of safety when installing new pools. Mr. Bernstein stated even with PSAs and code upgrades, supervision is the crux of the program and it is the key to pool safety.

Mr. Bernstein added the CCHD is involved with suicide prevention efforts. One project currently being worked on is a public information campaign. This campaign starts in the Spring of 2003 and will involve using bus stop shelters, ten second radio spots, which will provide the 800 suicide number, and a website, which is being set up. The purpose is to try to increase public awareness, and the amount of people utilizing the phone number and website. This is the first step in the Surgeon General's report. Mr. Bernstein noted most people are surprised to learn how high the suicide rate is in Nevada and then contribute it to the availability of gambling and drinking establishments. However, statistical data shows these are not the main reasons why people are committing suicide in our state. Mr. Bernstein added there is a bill regarding starting a suicide prevention program in the state before the Legislature now.

Ms. Rivas noted the drowning data Mr. Bernstein spoke about is included in the data surveillance report.

SUICIDE PREVENTION EFFORTS IN NEVADA REPORT

Misty Allen, Crisis Call Line Coordinator for the Crisis Call Center (CCC) began by speaking of the events on the federal and state levels, which led up to the Nevada Legislature passing Senate Concurrent Resolution 11 (SCR11). SCR11 called for recognition of suicide as a serious health problem. Ms. Allen stated for over a decade Nevada has been ranked number one in the nation for suicides. The state, as a whole, is double the national average but in the rural areas it is triple the national average. She further explained how the Suicide Prevention Hotline came about and gave background information on SB 49, which is currently before the Legislature. Ms. Allen stated in 2000 Nevada dropped in ranking from number one to number two. The state of Alaska took over the number one spot. She stated the CCC is backed by the national 800 number, which is a safety net for the Nevada hotline. The hotline calls are ever increasing in the state. The majority of calls received are from adults aged 31 to 50 with youths making up two to five percent. It was noted calls from seniors are on the rise. Calls from the rural areas are also on the rise.

Mr. Bernstein included information on a pilot program through Columbia Teen Screen who received funding from the Tobacco Task Force (TFF). Columbia Teen Screen (CTS) is a well-researched and documented screening tool, which screens not only for potential suicide but 22 other mental health disorders in teens. The program was recently done in a high school where 90 permission slips were sent home. Out of those 90 slips, 30 were returned with an approval to participate. The youths, who completed the screening and received referrals, were contacted within 48 hours of that referral. Mr. Bernstein noted there are many issues surrounding the use of this screening tool within the schools and teen healthcare clinics.

Mr. Mackay asked if the demographics of suicides correspond to the calls the Crisis Call Center Receives. Specifically, if there is a significantly underrepresented portion of the population that commits suicide who does not take advantage of the Crisis Call Center or does not have access to it. Ms. Allen stated males and seniors fall into the category. Seniors tend not to reach out for help.

STATE FIRE MARSHAL'S OFFICE, INJURY PREVENTION EFFORTS IN NEVADA AND DATA REPORTING.

David Becker presented a slide show on an overview of the national reporting systems for Nevada. The Fire Marshal office has adopted the National Fire Incident Reporting System (NFIRS) 5.0 format, which is an all-incident reporting system. The system is a database, which uses modules to capture the safety data. The data reflects the type of fire, structure, civilian casualties and fire service casualties. Mr. Becker went over the specific information to be included in the database. This information is required under the United States Fire Administration. This program is an unfunded mandated program through the Fire Marshal's office since 1979. However, full state participation is not taking place due to financial constraints and technology problems. Mr. Becker stated because of the participation levels throughout the state, the statistics reported to the national agencies are not at all encompassing as it could be. He elaborated on this by saying the collection of data really began in 1998. Discussion on data collection issues and funding for the program ensued.

ACTION-INJURY PREVENTION SURVEY RESULTS, FOCUS GROUP RESULTS, DATA SURVEILLANCE RESULTS, AND TASK FORCE AGENCY REPRESENTATION OF TOP THREE PRIORITIES. REVIEW, DISCUSS AND MAKE RECOMMENDATIONS.

Ms. Rivas stated a review of all the survey results from the past year would be done before choosing the final priorities. She reminded everyone the top three priorities as gathered from the survey are traumatic spinal cord injuries, fall injuries, and traumatic brain injuries. The top three priorities from the focus group meetings are drug and alcohol abuse counseling, suicide prevention, and VAW. The Task Force Members chose the non-data driven categories of alcohol related injuries, traumatic spinal cord injuries, and free-fall injuries. Ms. Rivas noted bicycle and pedestrian injuries, suicide prevent, traumatic brain injuries, and motor vehicle crashes all tied for fourth. The data driven categories as chosen by the Task Force Members are: Objective 18.1 reduce the rate of suicide; Objective 15.15- reduce deaths caused by motor vehicle crashes; and Objective 15.7 and 15.8 reduce nonfatal poisonings and reduce deaths caused by poisonings. Ms. Rivas noted the fourth and fifth issues, respectively, are Objective 15.3 reduce firearm related deaths and Objective 15.27 reduce deaths and injuries from falls.

No action was taken due to time constraints. However, it was agreed Ms. Rivas would send an email to Task Force members requesting their recommendations.

VIOLENCE AGAINST WOMEN, DOMESTIC VIOLENCE EFFORTS IN NEVADA REPORT

Veronica Frenkel, State of Nevada Domestic Violence Ombudsman from the office of the Attorney General (AG) spoke about the efforts within the state as it related to domestic violence. One of her responsibilities is to collect law enforcement statistics from the Department of Public Safety (DPS). In law enforcement reports each year for the last 4 years there has been between 15% and 17% increase. She noted there were over 23,000 calls to Nevada Law Enforcement in 2001. An alarming statistic associated with this is more than 50% of those calls are placed from children. The association between risk to children, child abuse, and domestic violence is extremely high. It is known one third of female murder victims in this country are murdered by a spouse, former spouse, or boyfriend. Nevada leads the nation in per capita homicides due to domestic violence. In Nevada, unlike other states, there has been an increase in domestic violence homicides. Ms. Frenkel stated in 2001, Nevada had a 75% increase in domestic violence homicide. Domestic Violence results in more injuries than rapes, auto accidents, and more than 40 % of the emergency room visits by women. At least 90% of domestic violence victims are women. She also noted the leading cause of child abuse in this country is domestic violence in the home. More than 60% of men who abuse their wives also abuse their children. Witnessing domestic abuse has a health effect on children physically, mentally and emotionally. Ms. Frenkel said the approach being taken in the last few years has been a coordinated community response. She explained this as every person is part of a community and all should try to work together on the problem by sending the message of there being no excuse for domestic violence.

Ms. Frenkel spoke about her position with the State of Nevada. Her position was created in the 1997 Legislature. She elaborated on her statutory responsibilities noting one of these is to provide information and assistance to the general population of Nevada. She stated she is also responsible for collecting data and so far has collected only law enforcement data but has recently been collecting prosecution data.

Ms. Frenkel stated she is also required to provide education to the public and administer a state account for such programs as legal services to victims. The overall function of her position, she believes, is as a state level advocate, who tries to facilitate coordination, education, and communication with agencies, like this task force. Ms. Frenkel spoke about changes in the laws over the last few years. She noted there are now mandatory arrests for domestic battery. The officers can now make an arrest for probable cause in these cases. If there is an arrest, there is a mandatory 12-hour hold with no bail. Statutes for protective orders have been revised to clarify anyone coming into Nevada with a valid out-of-state protection order will have the order enforced. Federal law does require this but it is always helpful to have a state law to back it up. There is mandatory sentencing for assault and battery, which can range for a first time offender receiving a fine and possible jail time to a third time offender who would be charged with a felony resulting in fines and jail time. There is now a regulatory committee that oversees the court order treatment of domestic violence perpetrators to make sure they are in a certified program.

Ms. Frenkel explained there are several funding streams which are being utilized and run through her office. She stated there is an electronic repository for any protection ordered in the state of Nevada. Each protection order is entered into the system so law enforcement personnel can access it. She noted there is a project underway for training law enforcement officers to establish care and protocol for responding to domestic violence cases. She provided a handout of the state agencies involved with domestic violence.

NEVADA SAFE KIDS (WASHOE COUNTY) EFFORTS IN NEVADA AND WASHOE COUNTY, INJURY PREVENTION EFFORTS REPORT

Eric Guevin the Nevada Safe Kids Coordinator for Washoe County introduced himself. He spoke about several of the programs currently being done by Nevada Safe Kids in Washoe County. He noted the main program is injury prevention for child passenger safety. The goal is to educate adults in the proper use and installation of child safety seats. He mentioned a bill is before Legislature to encompass child booster seats, which are currently not covered by state statutes. Mr. Guevin described the other programs this coalition is involved in. A few of them would be, walk your child to school day which focuses on pedestrian safety; bicycle safety training, which includes an activity along with a safety helmet giveaway; and a water safety program called Water Watcher, which is about educating adults about child water safety. The premise behind the program is the statistics that most children drown at the feet of their parents or their guardians. Mr. Guevin stated the program has worked well in Arizona. For the kids, there is a program called Don't be a Water Sucker. The children get a sucker or lollipop when they have completed the program by learning about proper floatation devices and how to use the buddy system when swimming. Mr. Guevin spoke about window falls, which are becoming a major problem in Northern Nevada. He continued by explaining the scooter safety program called Scoot Away from Danger, which is done in the elementary and middle schools. This program incorporates a skit to talk about the need for proper protective equipment while using a scooter. Hot Cars is another educational program done in the summer to make kids aware of how hot it can become in a vehicle. This is demonstrated by cooking an egg on the dash of a car. Mr. Guevin stated in partnership with REMSA and News Channel 4, the coalition will be starting a program called REMSA Respond. This will be a short series of short educational episodes on strokes, heart attacks, calling 9-1-1, and getting out of the way for emergency vehicles. He noted they are currently working towards doing a program on poison prevention, which has been identified as a risk area. Mr. Guevin spoke about the wintertime extreme sports ski helmet program. In collaboration with the Junior Ski Program and Washoe Medical Center, helmets are available for purchase at a cost of about \$45.00 when they can run approximately \$120.00. They have found kids are more willing to wear them if the parents purchase them. There is a scholarship program where the kids could receive a helmet if they write an essay stating they would wear the helmet and why.

In closing, Mr. Guevin noted one of the aspirations of Nevada Safe Kids is to have an injury prevention conference at the lake. The first one will be on April 7, 2003 at the Cal Neva. It will be called For Safety Sake at the Lake. There will be a technician course offered which will be the main thrust of the conference with the addition of other components around it. There are 24 spaces left available at the conference. If anyone is interested in attending the conference, they may contact Mr. Guervin at (775) 858-5700. The website for Nevada Safe Kids can be reached through the REMSA website at www.remsa.com.

ACTION-STRATEGIC PLANNING OF TOP THREE INJURY PREVENTION PRIORITIES FOR NEVADA. REVIEW, DISCUSS AND MAKE RECOMMENDATIONS.

Ms. Rivas explained this action item was in response to the grant cycle being moved from the end of June to April 18, 2003. Due to the time constraints, she requested the Task Force to support the top three priorities as discussed. Ms. Rivas stated she would then send an email to the Task Force requesting their ideas on strategies to accomplish these. A discussion to clarify exactly the decisions the Task Force needs to complete took place. Ms. Rivas covered the questions she would be asking in the email.

Ms. Rivas noted this action item and the previous action item would be combined on the email to be sent to Task Force members.

ACTION – TASK FORCE TO SET NEXT MEETING DATE

After discussion by the Task Force, it was agreed upon for Ms. Rivas to also include in her email to members the next meeting date. It was noted the next meeting whether by conference call or in person should be done quickly because of the deadlines for the grant process.

PUBLIC COMMENT AND DISCUSSION

Dr. John Fildes spoke about the Trauma Institute at the request of Ms. Rivas. He stated it is a work group within the Department of Surgery at the School of Medicine and is the home for injury prevention activities. The Trauma Institute currently has a CDC grant for the suicide prevention research center and the University Medical Center (UMC) grant, which they administer. It has also done projects for the State Attorney General on domestic violence. The suicide prevention center is in the second cycle and has been called upon to generate research efforts in suicide surveillance. The scope of the project was to begin in Nevada, which has historically been the highest state by rate for suicides. The project would then be disseminated throughout the intermountain west states. These states include eight of the top ten states by rate for suicide. The methods they have been working on to quantify and locate high occurrence areas are now being disseminated in the other areas throughout the intermountain west in hopes it will become the model for a national surveillance. Within Nevada, a lot of work has been done and we now have the ability now to identify suicides across the state in all counties to identify them by age, gender, ethnicity, and reference by township and county. Dr. Fildes noted different patterns in different groups have been found. An example is the elderly tend to have a high rate of white male members with a great deal of premeditation and completion rate. He noted less populated counties have higher rates. He noted they will now be able to identify geographic hot spots, and be able to provide the community with a stratification of gender and demographic so a community preparedness process could be exercised. Dr. Fildes spoke on the Crash Outcome Data Evaluation Systems (CODES) project stating it is in the advanced stage of the outcome data evaluation system. The most recent project has been the comparison of costs and medical outcomes for helmeted and non-helmeted motorcycle riders. This is a very strict data and statistical exercise, which includes 16 states. The information is given directly to the Washington office and used for policy formation at the national level.

A discussion of the statistics regarding motorcycle helmet issues ensued.

ADJOURNMENT

The meeting was adjourned at **4:55 p.m.**